

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|-----------|
| FEE DETERMINATION | | | 7/17/01 |
| O.I.P.E. CLASSIFIER | | 12 | 7/17/01 |
| FORMALITY REVIEW | TH | 953 | 6-8-16-01 |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 " Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

| Claim | Date |
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| Final Original 1/12/01 | |
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If more than 150 claims or 10 actions
staple additional sheet here

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